



21251 Ridgetop Circle
Suite 150
Sterling, VA 20166

Welcome to Centurion! As part of your full-time employment with us, you can enroll in our comprehensive health and welfare benefit program. You will have 31 days from your date of hire or your status change date to complete this enrollment. If you have any questions, please contact the Benefits Department by phone at (833)782-7404 or by email at Benefits@TeamCenturion.com.

- **Website:** Paycom.TeamCenturion.com or download the Paycom Mobile App.
- **Your username and password:** You will use your standard Centurion Single-Sign-On (SSO) login credentials - **Your company email address and unique password**, that you use to access your Centurion-issued computer, team Centurion email, Kronos Timesheet, and other SSO enabled Systems.
- **Password Help:** To self-reset your password, visit change.teamcenturion.com. For further password help, contact 24/7 IT Help Desk at 800-305-0468 or helpdesk@teamcenturion.com

Please sign into your Paycom account

A screenshot of the "EMPLOYEE SELF-SERVICE®" login page. The page has a green header with the title. Below the header is a white login form with three input fields: "Username *", "Password *", and "Last 4 digits of SSN or PIN *". Each field has a small eye icon to the right, indicating a toggle for visibility. Below the fields is a blue "LOG IN" button. Underneath the button are two links: "Forgot Username or Password ?" and "Log in Tips". Below the login form is a section titled "For Security Reasons" with three bullet points: "Paycom will never ask you to submit or change your account information through email.", "Paycom personnel will never ask you for your password.", and "Paycom will never ask you to log in to our site through email." A mouse cursor is visible over the top-left corner of the form area.

Please Answer Your Security Questions to Continue

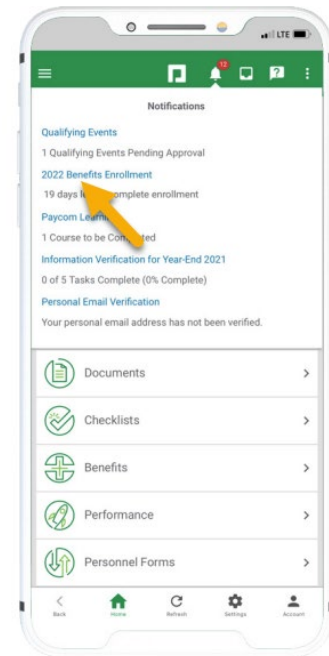
Mother's maiden name?


Grandmother's maiden name?


[CONTINUE](#)


- If it's the first time you have logged in you will be asked to change your password and select security questions.
- If you have logged in before you will be asked to answer your security questions

Once you have logged in the homepage will display. Please navigate to the notification center, tap on the current year's Benefit Enrollment. Review the instructions and tap "Start Enrollment".



			ACTIONS
	Eligibility Profile Eligible (EXE)	Preview Date 10/02/2023	Enrollment Year 2024

 To complete enrollment, press Finalize then Sign and Submit.

Hello 

Welcome to your 2024 Benefits Open Enrollment. At Centurion, we are committed to providing you a quality benefit program that offers:

- Accessible Healthcare
- Promotes Health Living
- Protects your finances
- Helps you achieve your retirement and financial goals
- Encourages a healthy work / life balance.

Below are tips for a successful Open Enrollment.

1. Log into UKG and review your current benefit elections
2. Attend at least one Benefit Open Enrollment Webinar and one Paycom How-To Enroll session.
3. Review the 2024 benefits roadmap.
4. Make sure you have all of your dependent and beneficiary information on hand. If you have not entered dependents before, you will need their social security number and date of birth.
5. To get started, click Start Enrollment.
6. Make sure you enroll in or decline all available benefits, then review and finalize your enrollment.

 [CONTINUE ENROLLMENT](#)

Review important information and announcements. Click Continue to start your enrollment.

Employee Name

Birth Date

Tobacco User
 Yes
 No

Primary Phone

Street address

City

Zip Code

Apt/Suite/Other

State

Review your current personal information and if anything needs to be updated click edit. Otherwise click next.



- Click Add to add any dependents or beneficiaries not currently listed.
- Click on each dependent &/or beneficiary to review their information.

You may add or edit dependents and beneficiaries at anytime. Only dependents and beneficiaries not associated with an active plan can be deleted.

Name	Relationship	Dependent	Beneficiary	Birth Date	Gender	
<input type="text"/>	Child	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text"/>	Male	<input type="button" value="edit"/> <input type="button" value="delete"/>
<input type="text"/>	Child	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text"/>	Female	<input type="button" value="edit"/> <input type="button" value="delete"/>

Group 2 - Anthem BCBS HDHP Medical Compare

Choose Your Coverage

- Employee Only - \$28.45
- Employee and Spouse - \$130.38
- Employee and Children - \$78.88
- Employee and Family - \$197.46

Plan Details	In-Network	Out-of-Network
Individual Deductible	\$3,200.00	\$3,200.00
Family Deductible	\$6,400.00	\$6,400.00
Individual Out of Pocket Maximum	\$4,750.00	\$4,750.00
Family Out of Pocket Maximum	\$9,500.00	\$9,500.00
Preventive Care/Screening/Immunization	Plan pays for 100%	40% after deductible

Review all benefit options

Click on the benefit option and tier level you would like to enroll in.

Dependents

<input type="checkbox"/>	Name	Age at Start of Coverage	Relationship	Documents
<input type="checkbox"/>	<input type="text"/>	13	Child	0
<input type="checkbox"/>	<input type="text"/>	16	Child	0

Decline Coverage

Select dependents you would like to enroll in.

Click Enroll on the bottom of the screen.

If you do not wish to enroll in benefits click Decline.

2024 Benefits Enrollment

\$313.13
Total Cost
Per Pay Period

<input checked="" type="checkbox"/>	Contact Information	
<input checked="" type="checkbox"/>	Dependents and Beneficiaries	
<input checked="" type="checkbox"/>	Medical	\$78.88
<input checked="" type="checkbox"/>	HSA	\$100.00
<input checked="" type="checkbox"/>	Dental	\$12.38
<input checked="" type="checkbox"/>	Vision	\$0.00
<input checked="" type="checkbox"/>	Flexible Spending Account - Limited Purpose	\$0.00
<input checked="" type="checkbox"/>	Group 2 - TRS-AD Flex Spending Account - Dependent Care	\$0.00
<input checked="" type="checkbox"/>	Parking	\$0.00
<input checked="" type="checkbox"/>	Transportation	\$100.00
<input checked="" type="checkbox"/>	Group 2 - NY Life Short Term Disability	
<input checked="" type="checkbox"/>	Group 2 - NY Life Long Term Disability - Executive	
<input checked="" type="checkbox"/>	Group 2 - NY Life Basic Life and AD&D - Employee	
<input checked="" type="checkbox"/>	Group 2 - NY Life Voluntary Life - Employee	\$13.25
<input checked="" type="checkbox"/>	Group 2 - NY Life Voluntary Life - Spouse	

Click through all benefit options and enroll or decline.

Remember to add beneficiaries to your company provided life and voluntary life coverages.

Once you have elected or declined all options review your enrollment elections to ensure you have enrolled in all plans you would like to.

You will not be able to make changes until the next open enrollment period unless you experience a qualifying life event.

In Progress Benefits

Plan Name	Deduction Start Date	Deduction Frequency	Tax Treatment
Group 2 - Delta Dental Plus Premier (DE24)	01/01/2024	Every Payroll	Pre-Tax
Group 2 - TRS-AD Transportation (TR24)	01/01/2024	Every Payroll	Pre-Tax

Requested Benefits

Plan Name	Deduction Start Date	Deduction Frequency	Tax Treatment	Tobacco Rates	Coverage Level
No Records Found					

Approved Benefits

Plan Name	Deduction Start Date	Deduction Frequency	Tax Treatment
Group 2 - Cigna Employee Assistance Program (EA24)	01/01/2024
Group 2 - NY Life Long Term Disability - Executive (LE24)	01/01/2024

Declined/Denied Benefits

Plan Name	Deduction Start Date	Deduction Frequency	Tax Treatment
Decline All Medical - I still want the Health Care FSA (FM25)	01/01/2024
Group 2 - Anthem BCBS Standard PPO Medical (MC24)	01/01/2024	Every Payroll	Pre-Tax
Group 2 - Anthem BCBS Choice PPO Medical (MD24)	01/01/2024	Every Payroll	Pre-Tax

Terminated Benefits

Plan Name	Deduction Start Date	Deduction Frequency	Tax Treatment	Status	Carrier Status	Tobacco Rates
No Records Found						

Benefit elections cannot be changed until next year's Open Enrollment or you have a Qualifying Event.

Dependent Information

Group 2 - Anthem BCBS HDHP Medical

Name	Display Code	Relationship	SSN	Benefit Effective Date	Benefit End Date

Employee Signature and Totals

Employee Name	Date Electronically Signed	Total Employer Cost	Total Employee Deduction
		\$548.85	\$313.13

Employer Amount is for record keeping only and is not included in employee deduction total. Percentage values are not added to employee deduction total.

✗ Accident	\$0.00
✗ Critical Illness	\$0.00
✓ Hospital	\$7.70
✓ EAP	\$0.00
✗ Pet Insurance	\$0.00

Select Finalize once you have reviewed your enrollment and everything looks correct.

A window will pop up asking you to sign and submit.

Enrollment Submission ✕

Please review your enrollment. When complete, press sign and submit. This will complete enrollment.

View Detailed Enrollment ^

i Congratulations! Your enrollment is complete. Below is a recap of your elections including who will be covered under each benefit plan and your named beneficiaries.

Congratulations!
Your enrollment is complete.



Call the Benefits Support center at 833-782-7404

Visit employeeconnects.com/centurion to schedule an appointment with a benefits counselor.

Email the benefits team at Benefits@TeamCenturion.com